

Dear Parent/Guardian:

Missouri State Law, Section 210.003, RSMo, requires **all** children attending public, private, parochial day care centers, preschools or nursery schools to be adequately immunized, in the process of being immunized, or to have a written exemption on file for the following diseases.

- diphtheria/tetanus/pertussis (DTaP/DT),
- polio (IPV or OPV),
- hepatitis B (HB),
- *Haemophilus influenzae* type b (Hib),
- measles/mumps/rubella (MMR), and
- varicella (VZV), or written proof of disease

According to our records, your child _____
needs the following immunization(s) in order to meet State law requirements.

Check the Needed Immunizations	DATES GIVEN			
	Dose No. 1	Dose No. 2	Dose No. 3	Dose No. 4
<input type="checkbox"/> DTaP/DT				
<input type="checkbox"/> Polio				
<input type="checkbox"/> Hib				
<input type="checkbox"/> Hepatitis B (HB)				
<input type="checkbox"/> MMR				
<input type="checkbox"/> Varicella or a signed statement by parent/ guardian indicating date of varicella disease				

IMMUNIZATION REQUIREMENTS FOR CHILDREN ENROLLED IN CHILD CARE FACILITIES

<u>AGE</u>	<u>NUMBER OF DOSES</u>
0 thru 2 months of age.....	1 HB
3 thru 4 months of age.....	1 DTaP/DT, 1 Polio, 1 Hib, 1 or 2 HB
5 thru 6 months of age.....	2 DTaP/DT, 2 Polio, 1 or more Hib, 2 or 3 HB
7 thru 18 months of age.....	3 DTaP/DT, 2 Polio, 1 or more Hib, 2 or 3 HB
19 months to kindergarten entry.....	4 DTaP/DT, 3 Polio, at least 1 Hib after 12 months of age, 1 MMR, 3 HB, 1 Varicella (Chickenpox)

If your child has already received the immunization(s) indicated above, please provide a copy of their official immunization record. Your child must have proof of the required immunization(s); otherwise, by law, your child may not attend this facility.

Sincerely,